Under the Paperwor	k Reduction Ac	t of 1995, no person	s are requin	ed to respond to a collection	of information	unless it displays a	valid OMB control num	b€
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete If Known				
				Application Number	10/053,753		_	
FEE TRANSMITTAL				Filing Date January		22, 2002		
for FY 2006				First Named Inventor	rst Named Inventor Lester F. Lau			_
				Examiner Name Woitach, Joseph T.				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	1632			_
TOTAL AMOUNT OF PAYMENT (\$)1000				Attomey Docket No.	05031.0003.CNUS02			_
METHOD OF PAYMEN	r (check all	that apply)						_
Check Credit		Money Order	None	Other (please id	entify):			_
								_
Deposit Account D							& White	-
	•		or is herei	by authorized to: (check				
Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
WARNING: Information on th Information and authorization	is form may be n on PTO-2038	ecome public. Cred i.	it card info	rmation should not be inc	luded on this	form. Provide cred	lit card	
FEE CALCULATION (All the fees	below are due	upon fili	ing or may be subje	ct to a surc	harge.)		_
1. BASIC FILING, SEA								
FILING FEES SEA			SEAR	CH FEES	EXAMINATION FEES			
	-	imall Entity		Small Entity	T . (A)	Small Entity	Free Brid (6)	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)	Fee (\$) 100	Fees Paid (\$)	
Utility	300	150	500	250	200 130	65		
Design	200	100	100 300	50 150	160	80 -		
Plant	200	100			600	300		
Reissue	300	150	500	250 0	0	0		
Provisional	200	100	0	U	U		mail Entity	
2. EXCESS CLAIM FEES							Fee (\$)	
Fee Description Each claim over 20 (including Reissues)						Fee (\$) 50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent claims						360	180	
Total Claims				s Pald (\$)			endent Claims	
- 20 or HP		×				Fee (\$)	Fee Paid (\$)	
HP = highest number of total c Indep. Claims	laims paid for, I Extra Cla		s) Fee	es Paid (\$)				
- 3 or HP		x						
HP = highest number of indep	endent claims p	aid for, if greater tha	n 3					
3. APPLICATION SIZE	FEE							
If the specification	and drawin	gs exceed 100 s	heets of p	paper (excluding elec	ronically fi	led sequence or	computer	
				due is \$250 (\$125 fo	small entit	y) for each add	itional 50	
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof						Fee (\$)	Fee Paid (\$)	
- 100 = /50= (round up to a whole number) x =								
4. OTHER FEE(S)							Fee Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Issue fee \$700 and Publication Fee \$300							04000	
Other (e.g., late fil	ing surchars	ge): <u>Issue fee</u> \$	700 and J	Publication Fee \$300			<u>\$1000</u>	
SUBMITTED BY	\							_

Telephone (312) 595-1408 Registration No. 36,107 Signature (Attorney/Agent) Date April 28, 2006 Name (Print/Type) David W. Clouch Ph.D

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, OSF1 OF pices; an angiogeauth cultimizating is governed by a 3.5. I. 22 and 3 CVT 1.1. It is souther is extended in standard and including gathering, preparing, and submitting the completed application form to the USF1O. Time will vary depending upon the individual case. An comments on the amount of time you require to complete this form and/or suggestion for moticing his burden, should be sent to the Chief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 2231-1450. DO NOT SEND TESS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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